



**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII  
STATE ETHICS COMMISSION

HETI

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
Rosehill,	Linda	K.	536-2611
MAILING ADDRESS (Street)			FAX
1088 Bishop Street, Suite 1010			524-2628
(City)	(State)	(Zip Code)	
Honolulu,	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Rosehill & Associates			
MAILING ADDRESS (Street)			FAX
Same as above.			
(City)	(State)	(Zip Code)	

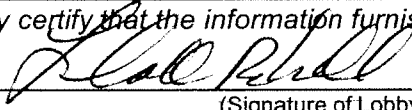
<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaii Escrow & Title, Incorporated		532-2977
MAILING ADDRESS (Street)		FAX
700 Bishop Street, Suite 1600		efax: 888-512-4778
(City)	(State)	(Zip Code)
Honolulu,	HI	96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Denise Kaehu		
MAILING ADDRESS (Street)		FAX
Same as above		
(City)	(State)	(Zip Code)

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Y Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

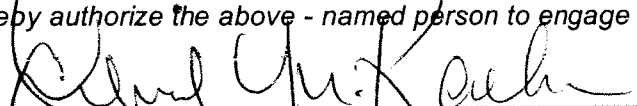


(Signature of Lobbyist)

3/20/07

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
Denise Kaehu		President	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
Hawaii Escrow & Title, Incorporated		532-2977	
MAILING ADDRESS (Street)		FAX efax:	
700 Bishop Street, Suite 1600		888-512-4778	
(City)	(State)	(Zip Code)	
Honolulu,	HI	96813	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
		3/14/07	
(Signature of Authorizing Officer or Person Represented)		(Date)	